

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF PUERTO RICO

IN RE:

RAMON A. MONTANEZ MARTINEZ  
ZORAIDA ESQUILIN RODRIGUEZ  
DEBTOR(S)

CASE NO 11-10531-BKT  
CHAPTER 13

NOTICE OF FILING OF AMENDED CHAPTER 13 PLAN  
AND CERTIFICATE OF SERVICE

TO THE HONORABLE COURT:

NOW COME, RAMON A. MONTANEZ MARTINEZ and ZORAIDA ESQUILIN RODRIGUEZ, through the undersigned attorney, and very respectfully state and pray as follows:

1. Debtors are hereby submitting an amended Plan dated January 31, 2012, herewith and attached to this motion.
2. This amended Chapter 13 Plan is filed to increase the Plan base to cure the "insufficiently funded".

I CERTIFY that on this same date a copy of this notice was sent via electronically with the Clerk of the Court using CM/ECF systems which will send notifications of such to the Chapter 13 Trustee; and also certify that I have mailed by United States Postal Service copy of this motion to the following non CM/ECF participants: debtors, Ramon A. Montanez Martinez and Zoraida Esquelin Rodriguez; and to all creditors and parties in interest in the present case.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 31<sup>st</sup> day of January, 2012.

/s/ Roberto Figueroa-Carrasquillo  
USDC #203614  
ATTORNEY FOR PETITIONERS  
PO BOX 193677  
SAN JUAN PR 00919-3677  
TEL NO (787) 744-7699 FAX 746-5294  
EMAIL: [rfigueroa@rfclawpr.com](mailto:rfigueroa@rfclawpr.com)

United States Bankruptcy Court  
District of Puerto Rico

IN RE:

Case No. 11-10531-13

MONTANEZ MARTINEZ, RAMON ANTONIO & ESQUILIN RODRIGUEZ, ZORAIDA

Chapter 13

Debtor(s)

## CHAPTER 13 PAYMENT PLAN

1. The future earnings of the Debtor(s) are submitted to the supervision and control of the Trustee and the Debtor(s) shall make payments to the Trustee  directly  by payroll deductions as hereinafter provided in the PAYMENT PLAN SCHEDULE.
2. The Trustee shall distribute the funds so received as hereinafter provided in the DISBURSEMENT SCHEME.

PLAN DATED: _____ <input type="checkbox"/> PRE <input type="checkbox"/> POST-CONFIRMATION	<input checked="" type="checkbox"/> AMENDED PLAN DATED: 1/31/2012 Filed by: <input checked="" type="checkbox"/> Debtor <input type="checkbox"/> Trustee <input type="checkbox"/> Other												
<b>I. PAYMENT PLAN SCHEDULE</b> <table> <tr> <td>\$ 400.00 x 12 = \$ 4,800.00</td> <td></td> </tr> <tr> <td>\$ 580.00 x 48 = \$ 27,840.00</td> <td></td> </tr> <tr> <td>\$ _____ x _____ = \$ _____</td> <td></td> </tr> <tr> <td>\$ _____ x _____ = \$ _____</td> <td></td> </tr> <tr> <td>\$ _____ x _____ = \$ _____</td> <td></td> </tr> <tr> <td colspan="2">TOTAL: \$ 32,640.00</td> </tr> </table> <p>Additional Payments: \$ 11,020.00 to be paid as a LUMP SUM within 18 months with proceeds to come from:</p> <p><input type="checkbox"/> Sale of Property identified as follows:</p> <p><input checked="" type="checkbox"/> Other: Claim listed in Schedule B.</p> <p>Periodic Payments to be made other than, and in addition to the above: \$ _____ x _____ = \$ _____</p> <p>PROPOSED BASE: \$ 43,660.00</p>		\$ 400.00 x 12 = \$ 4,800.00		\$ 580.00 x 48 = \$ 27,840.00		\$ _____ x _____ = \$ _____		\$ _____ x _____ = \$ _____		\$ _____ x _____ = \$ _____		TOTAL: \$ 32,640.00	
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TOTAL: \$ 32,640.00													
<b>II. DISBURSEMENT SCHEDULE</b> <ol style="list-style-type: none"> <li>A. ADEQUATE PROTECTION PAYMENTS OR \$ _____</li> <li>B. SECURED CLAIMS: <input type="checkbox"/> Debtor represents no secured claims. <input checked="" type="checkbox"/> Creditors having secured claims will retain their liens and shall be paid as follows:           <ol style="list-style-type: none"> <li>1. <input checked="" type="checkbox"/> Trustee pays secured ARREARS: Cr. DORAL FINANCIAL Cr. ORIENTAL BANK &amp; Cr. # 8930070015071 # 61010010036791 # \$ 4,304.00 \$ 825.00 \$</li> <li>2. <input checked="" type="checkbox"/> Trustee pays IN FULL Secured Claims: Cr. BANCO BILBAO VIZ Cr. BANCO BILBAO VIZ Cr. # 13249615113366 # 13249611389634 # \$ 4,941.44 \$ 3,472.73 \$</li> <li>3. <input type="checkbox"/> Trustee pays VALUE OF COLLATERAL: Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____</li> <li>4. <input type="checkbox"/> Debtor SURRENDERS COLLATERAL to Lien Holder: _____</li> <li>5. <input type="checkbox"/> Other: _____</li> <li>6. <input checked="" type="checkbox"/> Debtor otherwise maintains regular payments directly to: DORAL FINANCIAL ORIENTAL BANK &amp;</li> </ol> </li> <li>C. PRIORITIES: The Trustee shall pay priorities in accordance with the law. 11 U.S.C. § 507 and § 1322(a)(2)</li> <li>D. UNSECURED CLAIMS: Plan <input type="checkbox"/> Classifies <input checked="" type="checkbox"/> Does not Classify Claims.</li> <li>1. (a) Class A: <input type="checkbox"/> Co-debtor Claims / <input type="checkbox"/> Other: _____ <input type="checkbox"/> Paid 100% / <input type="checkbox"/> Other: _____ Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____</li> <li>2. Unsecured Claims otherwise receive PRO-RATA disbursements.</li> </ol> <p>OTHER PROVISIONS: (Executory contracts; payment of interest to unsecureds, etc.) PV-\$18,239.00 Creditor: Department of Education/Sally Mae (Student Loan) to be paid directly outside the Plan. Debtor(s) to provide ADEQUATE PROTECTION PAYMENTS to BBVA (3366) and BBVA (9634) thru the Trustee in the sum \$100.00 per month for the next eight months or until confirmation. Debtor(s) to provide auto insurance upon maturity to BBVA (3366) and BBVA (9634) thru GT Insurance Group, Inc. Late filed claims filed by creditors will receive no distribution. "Surrenders collateral": Shares/savings in any Cooperativa/Association/Bank. Debtor reserves the right to object claims after plan confirmation. * "Tax refunds will be devoted each year, as periodic payments, to the plan's funding until plan completion. The plan shall be deemed modified by such amount, without the need of further Court order. The debtor(s) shall seek court's authorization prior any use of funds."</p>													

Attorney for Debtor R. Figueroa Carrasquillo Law Office

Phone: (787) 744-7699

**ESQUILIN RODRIGUEZ, ZORAIDA**  
**HC 03 BOX 7157**  
**JUNCOS, PR 00777-9721**

**NCO FINANCIAL SYSTEMS**  
**PO BOX 192478**  
**HATO REY, PR 00918**

**R. Figueroa Carrasquillo  
Law Office  
PO Box 193677  
San Juan, PR 00919-3677**

**ORIENTAL BANK & TRUST  
PO BOX 1952  
HUMACAO, PR 00792-1952**

**ASOCIACION EMPLEADOS ELA**  
**PO BOX 364508**  
**SAN JUAN, PR 00936-4508**

**SALLIE MAE**  
**PO BOX 9500**  
**WILKES BARRE, PA 18773**

**AT&T  
5407 ANDREWS HIGHWAY  
MIDLAND, TX 79706**

**BANCO BILBAO VIZCAYA ARGENTARIA  
PO BOX 364745  
SAN JUAN, PR 00936-4745**

**CONVERGENT OUTSOURCING  
800 SW 39TH ST  
RENTON, WA 98057**

**DEPARTMENT OF EDUCATION  
PO BOX 4169  
GREENVILLE, TX 75403-4169**

**DEPARTMENT OF EDUCATION  
121 S 13TH ST  
LINCOLN, NE 68508**

**DORAL FINANCIAL  
1451 FD ROOSEVELT AVE  
SAN JUAN, PR 00920**